

COUNTY OF SAN DIEGO DEPARTMENT OF PLANNING AND LAND USE: Zoning PROJECT FACILITY COMMITMENT FORM, Sewer

| Please type or use pen | OBC | C |
|---|---|-----------------------|
| | ORG | 3 |
| Owner's Name Phone | ACT | |
| Owner's Mailing Address Street | TASK | |
| o more intermined that it is a second | | AMT \$ |
| City State Zip | DISTRICT CASHIER'S U | - |
| SECTION 1. PROJECT DESCRIPTION | TO BE COMPLETED | |
| OLOTION I. TROOLOT BEOORII TION | TO BE COMIT EETEL | DI ALI LIOANI |
| Major Subdivision (TM) Case No. Minor Subdivision (TPM) Case No. Major Use Permit (MUP) Case No. | Assessor's Parcel Nun (Add extra if necessa | |
| Purpose of MUP: | | |
| Certificate of Compliance Other | | |
| 2. Residential Total number of dwelling units | | |
| Commercial Gross floor area | | |
| Industrial Gross floor area Other Gross floor area | | |
| | Thomas Bros. Page | Grid |
| 3. Total Project acreageTotal lotsSmallest proposed lot | | , |
| Yes No 4. Is the project proposing its own wastewater treatment plant? | Project address S | treet |
| Is the project proposing its own wastewater treatment plant? | Community Planning Area/Subregion | Zip |
| | , , | · |
| Applicant's Signature: | Date: | |
| Address: (On completion of above, present to the sewer district with appropriate | Phone: | tion B holow) |
| | | |
| SECTION 2: FACILITY COMMITMENT | TO BE COMPLETED BY DISTR | |
| Pursuant to the Public Facility Element of the General Plan and County Boaperiod of at least years. Commitment must be obtained within the three mo authority. THIS IS NOT A WASTEWATER DISCHARGE PERMIT, and cap discharge permit. | nths prior to the date of final action by the pacity fees are subject to increase prior | ne approving |
| District name Service are | | |
| Amount of capacity committed for this project: Optional: Number of EDUs x Connection Fees \$ | EDUs. = Total Capacity Fees: \$ | |
| Facility capacity has been committed pursuant to a binding agreemen (Commitment must be for a minimum of two years. If no expiration days | i salistaciony to the district. Expiration o | ate: |
| ☐ Facility capacity is committed for this project until | . (Termination date of t | his letter must be at |
| least two years from the date of issuance.) The District Board of Directors has certified that public agency facilitie | s are under construction and permits to | construct have been |
| received. Capacity for this project is committed for a period of at least | two years from the time that the public | agency's facility |
| improvements come on-line. Scheduled (not guaranteed) start-up dat until: | e:Facility capacit | y is committed |
| (if no expiration date, please so specify). | | |
| | | |
| | | |
| Authorized signature F | Print name | |
| Authorized Signature F | THE HAITE | |
| Print title | Phone | |
| On completion of Section B by the District, ap | | |
| the Department of Public Works, Final Maps or Grading, | | 23 |